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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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			Attorney Docket Number	PU030319			
DECLARA		FOR UTILITY OR SIGN	First Named Inventor	Jill MacDonald Boyce			
PATE		PPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)			Application Number	1			
Declaration Submitted	OR	☐Declaration Submitted after Initial	Filing Date				
With Initial	Filing (surcharge (37 CFR 1.16 (e)) required)	Filing (surcharge	Group Art Unit				
Filing		Examiner Name					

As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
ROBUST MODE STAGGERCASTING USER CONTROLLED SWITCHING MODES									
the specification of which	the specification of which (Title of the Invention)								
is attached hereto			·						
OR									
was filed on (MM/DD/	YYYY)	as United States A	application Number of	PCT Internationa	al l				
Application Number	and	was amended on (MM/DD/	YYYY)	(i	f applicable).				
I hereby state that I have review specifically referred to above.	wed and understand the conte	nts of the above identified s	pecification, including	g the claims as ar	nended				
applications, material information	I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Foreign Filing Date Priority Certified Copy Attach									
Number(s)	Country	(MM/DD/YYYY) Country	Not Claimed	YES	NO				
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
ApplicationNumber(s	ApplicationNumber(s) Filing Date (MM/DD/YYYY)								
60/443,672	01/28/03		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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Address	P.O. Box 5312									
City					State ZI			IP .		
PRINCETON					NJ		08543	08543-5312		
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USA			(609) 734 - 6834				<u> </u>	734 - 6888		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
NAME OF SOL	E OR FIRST II	NVENTO	DR:		A petition has b	een filed fo	r this ı	unsigned inventor		
Given Name JI	LL MACDONAI			Family Name BOYCE						
-				or	Surname	· ·	Da	nte		
Inventor's Signature Jul MocDonald Bayu Country Citizenship										
Residence: City State					Country			tizenship		
Manalapan NJ				l	JSA		US	S		
Mailing Addres	ss 3 Bra	andywin	e Court							
Mailing Addres										
City		State		ZIP	P Country					
Manalapan		NJ		0772	7726 USA					
	COND INVENT	OR:				611 1.6-	. 4la i.a .			
				 +	A petition has be	en filea fo	r this t	unsigned inventor		
Given Name KUMAR					Family Name RAMASWAMY or Surname					
Inventor's Cim Manh way Date & March way										
Residence: City State					Country			Citizenship		
Princeton NJ					USA IN			IN		
Mailing Address 71 Sayre Drive										
Mailing Address										
City	State				ZIP			Country		
Princeton	NJ				08540 USA			SA		
Timoton.										
Additiona	ıı ınventors are b	eing nan	neu on the 1 supple	mental	Augilional linventor(s	, sincerta, r	. 5,55			

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned			or this unsigned inventor			
Given Name (first and middl	e [if any])	Family Name or Surname					
JEFFREY ALLEN		COOPER			•		
Inventor's Signature).Ax A10	1. Co			Date 3 4 6 4		
Residence: City Rocky Hill	State NJ	Country			US Citizenship		
Mailing Address 11 Toth Lane							
Mailing Address							
City Rocky Hill	NJ State	ZIP 08553 Country			untry		
Name of Additional Joint Inventor, if any:			A petition has been filed t	for t	this unsigned inventor		
Given Name (first and midd	le [if any])		Family Name or Surname				
Inventor's Signature					Date		
Residence: City	State	Country			Citizenship		
Mailing Address							
Mailing Address							
City	State	Zip	Zip Co		country		
Name of Additional Joint Inventor, if any:			A petition has been filed for		this unsigned inventor		
Given Name (first and midd	ile [if any])	Family Name or Surname					
Circuit and production of the circuit and the							
Inventor's Signature Date							
Residence: City	State	Cou	Country		Citizenship		
nesidence. Only							
Mailing Address							
Mailing Address	State		Zip		Country		
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PTO/SB/81 (11-04)

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POWER OF ATTORNEY CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	
Filing Date	
First Named Inventor	JEFFREY ALLEN COOPER et al.
Title	ROBUST MODE STAGGERCASTING USER CONTROLLED SWITCHING MODES
Art Unit	
Examiner Name	
Attorney Docket Number	PU030319

			Attorney	/ Docke	t Number PO	030319	
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Firm <i>or</i>	Joseph S. Tripoli, Patent Operations						
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Country		USA					
Telephone		609-734-6818		Fax	609-734-6888		
I am the:							
Applicant/Inventor.							
Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
SIGNATURE of Applicant or Assignee of Record							
Name RONALD H. KURDYLA, REG, NO, 26,932							
Signature Allenda							
Date	ate 7-17-05 Telephone 609-734-6818						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
□ *Total		forms are submi		, ccc b			

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Signature:

Typed Name As Signed:

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Chairman and CEO

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day of

DATED this

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Jøseph/8. Tripoli

Sr. Vice President Thomson Licensing Inc. and

Attorney In Fact for

THOMSON Licensing S.A.

Davida toinai

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